

## Disability Actions 303-9

The time limit for an eligibility decision for a Medicaid application based on disability is 90 days even if a proof of disability is already available. Approve or deny all disability-based Medicaid applications within 90 days. You may allow more than 90 days when the client provides verification late into the 90 days, when waiting for additional medical verifications, or the Disability Office is in the process of making a decision, etc. When the decision will take more than 90 days, notify the client and narrate the reason on CAAL.

Disability Applications	
Application Description	Action
SSI/SSA Disability Denial Exists	Deny the app, send MDDD. Look at all medical programs the person might be eligible for before sending any notices.
MRB-30 days	<b>Do Not Deny</b> an application in 30 days simply because the client has not provided some other verification such as assets. Instead, set alerts to again request verifications. Deny the case when there is information that makes the person ineligible, such as excess assets. Use the appropriate notice. If a disability review has been sent to the Medicaid Disability Office, inform them of the denial. If the reason for ineligibility affects some months and not others, proceed with the disability determination.
MRB - 90 days	<p>If the client has not provided necessary verifications within the 90 days time frame and the client has not made any effort to work with us, deny the application. Send MDIV.</p> <p>If the client is making efforts to provide the verifications, allow more time for the client to obtain them. Once the disability has been approved, give the client time to provide the additional verifications. If there is still no response, deny the app IV and document. Send MDIV.</p> <p>Once the packet has gone to the MRB, make every effort to obtain eligibility verifications before the decision is made. Do NOT deny the application IV before the 90<sup>th</sup> day.</p>
SSA DENIALS	
Before application	Deny the app, send MDDD. Look at all medical programs the person might be eligible for before sending any notices. (If denial is not based on disability, the MRB can do a disability determination.)
Open disability case	Disability denial from SSA/SSI, close case. Send MCDD. Re-open if they follow through with SSA appeal. As long as the SSA appeal is progress do not do any MRB redetermination reviews of disability status.
Open disability pending appeal	SSA/SSI appeal is exhausted and remains denied, close case and submit for overpayment.
Disability Approvals	

MRB Approval	Within 10 working days take action . Look at eligibility back to the date of application. Send approval notice. If SSA denies the application at the same time, the SSA denial takes precedence. Deny the application. Look at other possible programs.
Backdating Eligibility	
<p>When approving D-Medicaid for past months that are more than three months ago or to cover past PCN months, use today's date as the application date. PACMIS will WARN you that you are requesting retro medical more than 3 months prior to the date of application. This does not prevent you from using a benefit effective date more than 3 months earlier than the application date. By using this process, we will not show these cases as pending more than 90 days.</p> <p>Spenddown months- For back months of eligibility when a spenddown will be owed, DO NOT authorize a spenddown month over the top of a PCN month UNTIL the client has met spenddown. Also, if there will be any back Medicare months where a spenddown is owed, DO NOT authorize those months unless they client meets the spenddown for such months.</p>	